



Virginia Department of Agriculture and Consumer Services

Office of Dairy and Foods

P.O. Box 1163

Richmond, VA 23219

Phone: (804) 786-4003

Website: www.VAProduceSafety.com

VIRGINIA PRODUCE SAFETY FARM REGISTRATION		
Farm Contact Information		
Farm Name:	State ID:	
Address:	Phone:	
	Email:	
Point of Contact		
Name:	Role:	Phone:
Production / Training Information		
Approximate Acreage: <input type="checkbox"/> 0 - 10 <input type="checkbox"/> 51- 100 <input type="checkbox"/> 11 - 15 <input type="checkbox"/> 101- 499 <input type="checkbox"/> 16 - 20 <input type="checkbox"/> 500 - 99 <input type="checkbox"/> 21 - 50 <input type="checkbox"/> 1000+	Has anyone currently employed completed a Produce Safety Alliance Training (PSA) <input type="checkbox"/> Yes <input type="checkbox"/> No	Current Third Party Food Safety Program: <input type="checkbox"/> GAP <input type="checkbox"/> SQF <input type="checkbox"/> GFS <input type="checkbox"/> Primus <input type="checkbox"/> Harmonized <input type="checkbox"/> N/A
Farm Size: (based on average 3 year produce sales) <input type="checkbox"/> Large > \$500,000 <input type="checkbox"/> Small \$250,001 - \$500,000 <input type="checkbox"/> Very Small \$25,001 - \$250,000 <input type="checkbox"/> Exempt ≤ \$25,000	Do you have produce? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have covered produce? (See 21 C.F.R. §112.1) <input type="checkbox"/> Yes <input type="checkbox"/> No	Activities: <input type="checkbox"/> Produce Grower <input type="checkbox"/> Harvest Produce <input type="checkbox"/> Hold Produce <input type="checkbox"/> Pack Produce <input type="checkbox"/> Process Produce <input type="checkbox"/> Retail Produce
	Growing Season:	
Commodities Grown		
List of commodities:		

Owner/Manager Signature: _____ Date: _____

Owner/Manager Title: _____